

Installation of an implanted vascular access port or *port-a-cath*



Soon you will have a catheter installed under your skin in the upper chest. This fact sheet explains how it will be inserted. It also tells you what precautions to take when you return home.

What is an implanted vascular access port?

Often called a Port-a-Cath, this system is attached under the skin in the upper chest. It includes:

- A case containing a reservoir.
- A long, thin, flexible tube (catheter) connected to the case. The tube passes through a large vein near the heart. The Port-a-Cath can be accessed by inserting a needle into the tank.

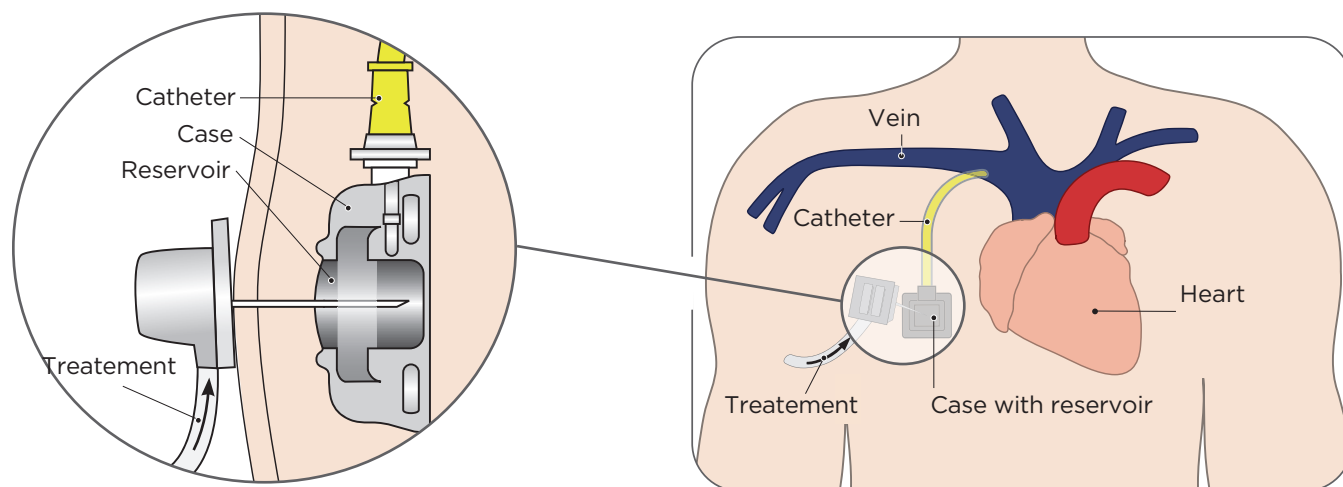
Why am I having this catheter installed?

This catheter may be installed because:

- You will be receiving a drug or nutritional supplements through your veins (intravenously) many times over a few months.
- Your veins are difficult to pierce.

The catheter avoids repeated injections in the veins of your arms. This will reduce irritation and discomfort.

Implanted vascular access port (Port-a-Cath)



To administer a treatment using a Port-a-Cath, it just needs to be injected into the reservoir. The product then travels through the catheter into a vein.

What precautions should I take BEFORE the intervention?

- A few days before intervention, a hospital employee will call you to check:
 - whether you have ever had surgery on your breast or chest
 - whether you have any allergies (such as to iodine)
 - whether you take medications, and if so, they will tell you which ones you should stop



You will have to stop taking certain medications and natural health products. For example, a week before, you have to stop taking:

- anti-inflammatories (Advil and Motrin)
- anticoagulants, which thin (clarify) your blood (Coumadin, Pradax, Asaphen)

Other products will have to be stopped even earlier. Follow your care team's instructions on this carefully.

- **The day of the intervention**
 - You don't need to be fasting before the intervention.
 - Plan to have someone accompany you.
 - Bring a list of your medications.
 - Go to the following location:

Radiology :
CHUM
Pavillon D, 3rd floor, room D0350
1000, rue Saint-Denis
Montréal (Québec) H2X 0C1

You will need to sign a form stating that you agree to have the intervention (consent). A nurse will take a blood test. Then she will inject a solution into your veins.

How is this intervention done?

The installation itself takes 1 hour, but the intervention takes 3 to 4 hours in all and is done in three phases.

PREPARATION

- You will lie on your back on an examination table.
- Your skin will be disinfected at the place where the catheter is to be inserted.
- The radiologist will do an ultrasound of your neck to find the vein that will be used.

INSERTION

This phase takes about 1 hour.

You may feel pressure and slight discomfort during the catheter installation.

- The radiologist will “freeze” (anaesthetize) the area of your neck and chest where the catheter will enter.
- A small incision will be made into the skin to access the vein.
- A needle will be placed in the vein to pass the catheter.
- The catheter will then be inserted into your vein.
- The case will be attached to a muscle in your chest.
- Your skin will then be closed with stitches (sutures). It could also be closed with an adhesive and sterile closure bandages (Steri-Strip).
- An x-ray will be done to make sure the catheter is in the correct position.

OBSERVATION PERIOD

You will need to stay in observation for about 1 hour to ensure everything is fine. You will be given a **card with information about your catheter**. You need to **keep this with you** in your wallet at all times. Whenever you see a doctor or nurse, tell them you have a catheter.



Are there any risks associated with this intervention?

Complications associated with catheter placement are rare, but can be serious.

- Bleeding.
- Thrombosis (blood clot in your veins causing a blockage). Your care team will take the necessary measures to prevent or resolve the situation.
- Infection: redness, heat, swelling or pain on the skin, fever of 38.3°C (100.9°F) or higher.

What effects might I have or feel once the catheter is installed?

- You might have a bruise where the catheter was inserted. It will go away in the few days or weeks following its insertion.
- You might feel a little pain. That's normal. Take mild analgesics, such as acetaminophen (Tylenol). The pain can last a few days to a few weeks.

What precautions should I take AFTER the intervention?

For **48 hours after** the catheter is installed, you need to:

- Keep your dressing clean and dry. If it is soaked with blood, apply pressure to it for 5 minutes with a clean compress or dry cloth. If blood flows out of the dressing, call the CLSC nurse, who will change it as soon as possible.
- Limit arm movements on the catheter side. Don't lift heavy objects. Don't make sudden or repetitive movements.



- **Don't** raise your arm above your head, for example to wash or style your hair.
- **Don't** play any contact sports

- **Don't** put any cream or ointment on the skin around your dressing.
- **Don't** carry any bag over your shoulder on the catheter side.



What happens after 48 hours?

48 hours after the procedure, remove the dressing. Keep the wound exposed to air and don't disinfect it. If the wound has been closed using:

- Adhesive: This will disappear on its own.
- Stitches: A CLSC nurse will call you to make an appointment to take them out, 7 to 10 days after the intervention.
- Sterile closure bandages, or Steri-Strips: These will come unglued and fall off on their own after a few days.

It is recommended to take baths instead of showers for the first 3 days or until the wound heals or the skin is closed. Keep your upper chest out of the water to keep the dressing and skin dry and clean.

- Once the dressing is removed, you will see a scar. It will be less visible over time. There will be a small bulge under the skin where the catheter is inserted. When you touch it, you will only feel the shape of the case.



After several weeks, there will be only a small scar and a slight swelling on the skin.

How should I take care of my catheter?

- The skin over the catheter doesn't require any specific care. Keep your skin clean by washing every day. Showering and swimming are allowed from the 4th day after the procedure, when the wound heals or a scar begins to form.
- If you want to apply a cream or ointment to the skin covering the case, consult your doctor.
- If you don't have any treatments, to keep the catheter from blocking between uses, it needs to be irrigated (rinsed) **at least every 4 to 12 weeks**. Make an appointment with the CLSC nurse, who will do the necessary maintenance.

What should I watch for?

Every day, check the following:

1 The skin over your catheter:

- ☐ is it red, hot, or swollen?
- ☐ is it very sensitive?
- ☐ is it leaking in the area around where the catheter was inserted?

2 Your overall health:

- ☐ Do you have a fever (38.3°C or 100.9°F)?
- ☐ Do you feel any pain where the catheter was inserted? In your neck or ear, on the catheter side?
- ☐ Are you having any trouble breathing, feeling dizzy or anxious?



If you answer **YES** to any of these questions, call your healthcare team or your CLSC nurse right away. They will guide you. Otherwise, call Info-Santé at **8-1-1**.

How long will I have the catheter?

It all depends on your health condition and the duration of your treatment. It can be a few months to several years.

Who can I contact for help or to ask questions?

For any health concern related to your catheter, you can call:

- Your CLSC nurse
- the CHUM Patient Health Line.



CHUM PATIENT HEALTH LINE

514 890-8086

24 hours a day, 7 days a week

You're a CHUM patient? You have questions about your health status? A nurse can help you.



USEFUL RESOURCES

Other health sheets published by the CHUM are available. Ask for those that might fit your situation.



You can also read them online.

chumontreal.qc.ca/fiches-sante

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